

# CLAIMS ONLY

SERIAL NO.  
09884566

FILING DATE  
6-19-01

APPLICANT(S)

## CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1			1			
2			1			
3			1			
4			1			
5			1			
6						
7						
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9						
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11						
12	1					
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14	1					
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16	1					
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50						
TOTAL IND.			1			
TOTAL DEP.			3			
TOTAL CLAIMS			4			

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	IND.	DEP.	IND.	DEP.	IND.	DEP.
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100						
TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						

\* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS

MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET  
(FOR USE WITH FORM PTO-875)

SERIAL NO. \_\_\_\_\_ FILING DATE \_\_\_\_\_  
APPLICANT(S) \_\_\_\_\_

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1						
2						
3						
4		2				
5		2				
6		2				
7		2				
8		1				
9		1				
10	1	1				
11	1	1				
12	1	1				
13	1	1				
14	1	1				
15	1	1				
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TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						

